

(Rev. 01/21) Complaint for Violation of Civil Rights (Prisoner)

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UNITED STATES DISTRICT COURT

for the

Southern
~~Western~~ District of New YorkAmended Complaint # 2
24-CV-00266

Case No.

(to be filled in by the Clerk's Office)

Luis Jaime

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint.
If the names of all the plaintiffs cannot fit in the space above,
please write "see attached" in the space and attach an additional
page with the full list of names.)

C.O. Matthew Maldonado # 6995, C.O. Steven BILKA # 6422,
C.O. Christopher Chester # 6275,
C.O. TYRON Patterson # 8483, SCO Pasquale CUGLIANDRO # 2916,
C.O. Christopher ROCA # 8315,
J. Desharnais # 140 and Defendant(s) Major McKee # 50

(Write the full name of each defendant who is being sued. If the
names of all the defendants cannot fit in the space above, please
write "see attached" in the space and attach an additional page
with the full list of names. Do not include addresses here.)

JURY TRIAL: Yes ☒ No ☐COMPLAINT FOR VIOLATION OF CIVIL RIGHTS
(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

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I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

All other names by which
you have been known:

ID Number

Current Institution

Address

~~Steven Bilka~~ Luis Jaime
N/A
2284805
Wende Correctional Facility
3040 Wende road., P.O. Box 1187
Alden NY 14004
City State Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name

Job or Title (*if known*)

Shield Number

Employer

Address

Steven Bilka
~~Defendant~~ Court Officer
6422
manhattan Criminal Court
100 Centre Street
New York NY 10013
City State Zip Code
☒ Individual capacity ☒ Official capacity

Defendant No. 2

Name

Job or Title (*if known*)

Shield Number

Employer

Address

matthew maldonado
~~Defendant~~ Court Officer
6995
manhattan Criminal Court
100 Centre Street
New York NY 10013
City State Zip Code
☒ Individual capacity ☒ Official capacity

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Defendant No. 3

Name

Christopher Chester

Job or Title (if known)

~~Officer~~ Court Officer

Shield Number

6275

Employer

Manhattan Criminal Court

Address

100 Centre Street

New York

NY

10013

City

State

Zip Code

☒ Individual capacity☒ Official capacity

Defendant No. 4

Name

Tyron Patterson

Job or Title (if known)

~~Officer~~ Court Officer

Shield Number

8483

Employer

Manhattan Criminal Court

Address

100 Centre Street

New York

NY

10013

City

State

Zip Code

☒ Individual capacity☒ Official capacity

II. Basis for Jurisdiction

Also including Court officers SLO Pasquale, Cugliandro #2916 and Court Officer Christopher Roca #8315. Sued in Individual Capacity and Official Capacity for both defendants.

Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

☐ Federal officials (a *Bivens* claim)☒ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

deliberate indifference to serious medical issue. Unreasonable use of force. Cruel and Unusual punishment.

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

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N/A

- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed. *deliberate indifferant to Serious medical issues Unreasonable Use of Force and Cruel and Unusual punishment.*

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (*explain*) _____

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

N/A

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose. *manhattan Criminal Courthouse on the 12th floor by stair case. Incident took place outside between reception to courtroom, on Date November 30 2024.*

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C. What date and approximate time did the events giving rise to your claim(s) occur?

Anywhere between 12:00 pm to 2:30 pm

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?

Was anyone else involved? Who else saw what happened?) AS I WAS coming back from Sentencing, on my way to the holding cell being escorted by Tyron ~~Patterson~~ Patterson, Christopher Chester and Cugliandro Pasquale cuffed behind my back, I tripped and fell down a flight of steps due to tangling and tripping on Tyron Pattersons ~~leg~~ foot and legs. AS I WAS ON the floor due to serious substantial pain on ~~my~~ Right Ankle, right leg, Left leg, back, chest and head. I ~~did not~~ first told Tyron Patterson, Sco Pasquale and Christopher Chester that I need Emergency medical Attention and Requested for Ems to be called due to me not able to get up due to Serious pain. Court Officers refused to call Ems and medical Assistance and then ~~Bilka~~ Tyron Patterson, Christopher Chester, ~~and~~ Cugliandro Pasquale, Christopher Roca, Mathew Maldonado and Steven Bilka proceeded to use

V. Injuries Unreasonable use of Force Causing Added serious substantial pain to upper and lower body. Prior to the unreasonable use of force I over heard officers making calls to gather If you sustained injuries related to the events alleged above, describe your injuries and state what medical more Court treatment, if any, you required and did or did not receive. Court Officers acted with malice officers, intent not making any attempt to call medical/Ems.

I ~~sustained~~ sustained ~~serious Substantive~~ injuries to Right Ankle, right leg, left leg, back, chest and head. Did not receive any medical treatment. I was not taken to the outside hospital, NO MRI's, X-RAYS, CATSCANS, pulse check or vitals were afforded in the above date.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims. I am requesting \$ 500 million dollars for damages and punitive damages.

the basis of my Claims are as follows: deliberate indifference to serious medical injuries and treatment. Unreasonable use of force, violating all of my civil rights. Cruel and unusual punishment. Sustained mental injuries, mental anguish, Emotional distress, permanent injuries to ~~back~~ upper and lower body. Unable to stand for a long period of time ~~long~~ because legs give out. Unable to stand up ~~being~~ straight or work out, run or indulge in sports/physical sports, Chronic ~~Right~~ leg pain, back pain and lower back pain, ^{all} permanent and lasting symptoms.

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VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Green Haven Correctional Facility.

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☐ Yes

☒ No

☐ Do not know

C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☐ Yes

☐ No

☒ Do not know

If yes, which claim(s)?

N/A

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- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☐ No

- E. If you did file a grievance:

1. Where did you file the grievance?

Greenhaven Correctional Facility

2. What did you claim in your grievance?

Unreasonable use of force, deliberate indifference to serious medical needs and cruel and unusual punishment.

3. What was the result, if any?

No response

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

No because of transfer and grievance not in facility where it occurred so facility can not investigate, due because incident occurred at another facility.

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F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

N/A

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

I filed a Notice of intent to file a claim to the Attorney General Office about incident that transpired and Manhattan Criminal Court.

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

N/A

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

☒ Yes☐ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

N/A

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- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☐ Yes

☒ No

- B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s) _____

Defendant(s) _____

2. Court (if federal court, name the district; if state court, name the county and State)

3. Docket or index number

4. Name of Judge assigned to your case

5. Approximate date of filing lawsuit

6. Is the case still pending?

☐ Yes

☒ No

If no, give the approximate date of disposition.

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

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IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

July 28 2024

Signature of Plaintiff

Luis Jaime

Printed Name of Plaintiff

Luis Jaime

Prison Identification #

22B4805

Prison Address

3040 Wendle road, P.O. Box 1187

Alden

City

NY

State

14004

Zip Code

B. For Attorneys

Date of signing:

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

E-mail Address

City

State

Zip Code

Added Complaint of what happened to me.

All three Officers that were present Stated: i amt shit, ~~because~~ i am a clown, Even if you were in pain we are not doing shit, we are going home, we do not have time to call medical or Ems, Get the fuck up bastard!, You piece of shit, So what if you are in pain you are in Jail fagget, Get up, ~~now~~ We dont care if you cant walk or your Ankle hurts, get up fagget, punk. ~~all~~ All Court officers then Stated: we dont Believe ^{you} anyway we will just Right it up that you a refusing to get up, You know how falsify stuff and there are no Cameras in hear who is going to believe you, you piece of shit, Get up! ~~as~~ As i was forced inside of the holding cell and still cuffed behind my back Ems ~~was~~ Escort officers then Stated we are not calling medical or Ems were are going back to NYS prison at Greenhaven we will afford you a cane and force you to walk. You Can seek medical Attention Once you are in Green haven. I then told Ems please take me to the hospital which they can.

As I got back ~~to~~ to Green Haven I went
~~need~~ directly to medical clinic in which I
 stated to nurse I need to go to the
 Outside hospital I think something is
 torn or broken. Nurse check my leg
 and determined that my ~~to~~ ~~leg~~ Ankle
 was swollen ignored taking taking
 me to the hospital and told
 Correction Officers to take me
 back to my cell. Around late
 December ~~and~~ I was taken to the
 Outside hospital by Sullivan Correctional
 Facility N.P. Armbruster, in which
~~Dr.~~ N.P. Justin at Harris Hospital
 at Sullivan County determined that my
 leg was swollen and recommended
 an MRI and for me to see a
 Orthopedic Specialist for further
 assessments. As the results from
 the incident I can not stand for
 a long time because my legs give
 out, unable to run, work out or
 stand up straight and walk with a
 limp. ~~Dr.~~ NP Justin afforded other
 continued and further treatment. →

As I was on the floor enduring serious Substantial pain to Upper body, Lower body and head, and legs L.T. Desharnais Continued mocking, disrespecting, cursing and demanding to get up forcefully along with all Other Court officers that were involved in this incident, L.T. Desharnais #140 and Mayor McKee #50 Also participated in the ~~unreasonable~~ Unreasonable Use of force and also were involved in denying me medical Attention. N.P. Justin Afforded me a Ankle Sprain as a result of these injuries.

WENDE CORRECTIONAL FACILITY

Wende Rd., P.O. Box 1187
Alden, New York 14004-1187

NAME: Kwame DIN: 2284805

CORRECTIONAL FACILITY



WENDE

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